

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/576,633
	Filing Date	November 14, 2006
	First Named Inventor	Shile SEBASTIAN
	Title	METHODS, PEPTIDES AND BIOTECHNOLOGICAL USEFUL FOR
	Art Unit	1645
	Examiner Name	Oluwalosin A. OGUNBIYI
	Attorney Docket Number	101713-5053-US

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on

SIGNATURE OF Applicant or Assignee of Record

Signature

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Date

12-14 Oct 2006

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Title and Company

Sr. I.P. Coordinator, Systagenix Wound Management (U.S.), Inc.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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